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PTO/SB/04 (08-03)  
Approved for use through 07/31/2006. OMB 0651-0032  
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**SUPPLEMENTAL  
DECLARATION FOR UTILITY  
OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.67)**

Attorney Docket Number	1376-9901410
First Named Inventor	Branko KOVACEVIC, et al.
COMPLETE IF KNOWN	
Application Number	09/489,669
Filing Date	01/24/2000
Art Unit	6121
Examiner Name	Cynthia H. BRITT

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM FOR HANDLING ERRORS

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 01/24/2000

as United States Application Number or PCT International

Application Number 09/489,669

and was amended on (MM/DD/YYYY)

04/20/2004

I hereby declare that the subject matter of the ☐ attached amendment ☐ amendment filed on  was part of the invention and was invented before the filing date of the original application, above identified for such invention.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

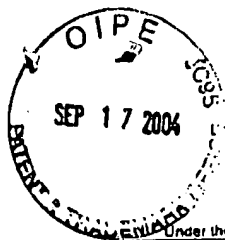
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		Certified Copy Attached?	
			YES	NO	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

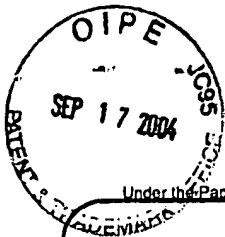
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### SUPPLEMENTAL DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number: <b>34456</b>		OR <input type="checkbox"/> Correspondence address below	
Name <b>J. Gustav Larson</b>					
Address <b>Toler, Larson &amp; Abel, LLP</b>					
Address <b>5000 Plaza On The Lake, Suite 265</b>					
City <b>Austin</b>		State <b>TX</b>		ZIP <b>78746</b>	
Country <b>US</b>		Telephone <b>512-327-5515</b>		Fax <b>512-327-5452</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.					
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Branko</b>		Family Name or Surname <b>KOVACEVIC</b>			
Inventor's Signature <i>Branko Kovacevic</i>				Date <b>SEP. 10, 2004</b>	
Residence: City <b>Willowdale</b>		State <b>Ontario</b>		Country <b>Canada</b>	
Mailing Address <b>60 Clipper Road, suite 1402, Willowdale, Ontario, Canada M2J 4E2</b>					
Mailing Address					
City		State		ZIP	
Country					
Name of Second Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Kevork</b>		Family Name or Surname <b>KECHICHIAN</b>			
Inventor's Signature <i>K. Kechichian</i>				Date <b>SEP 10 2004</b>	
Residence: City <b>Unionville</b>		State <b>Ontario</b>		Country <b>Canada</b>	
Mailing Address <b>135 Briarwood Road, Unionville, Ontario, Canada L3R 2X1</b>					
Mailing Address					
City		State		ZIP	
Country					
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/ 02A or 02LR attached hereto.					



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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/489,669	
	Filing Date	01/24/2000	
	First Named Inventor	Branko KOVACEVIC	
	Art Unit	2133	
	Examiner Name	Cynthia H. BRITT	
Total Number of Pages in This Submission	3	Attorney Docket Number	1376-9901410

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Supplemental Declaration
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Submission of Supplemental Declaration subsequent to payment of Issue Fee.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Ryan S. Davidson, Reg. No. 51,596
Signature	
Date	September 13, 2004

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Judy Carey
Signature	
Date	9/13/04

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